PART B - FEE(S) TRANSMITTAL

piete and send this form, together with applicable fec(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

	IENCE ADDRESS (Nois: Use ED		P P	ote: A cen e(s) Trans pers. Each ive its own	lificale of mi mittal. This c additional p certificate of	ertificate of the control of the con	only be used sanot be used as an assignment of transmission.	or domestic ma for any other ac- ent or formal dr	llings of the companying awing, mw
P.O. BOX 218	RATION, T.J. WA IEIGHTS, NY 1059	TSON RESEARC	CH CENTER 1	hereby cort stes Postal dressed to nasmitted to	Certifi tify that this I Service with the Mail S o the USPTO	cuts of Ma Sec(s) Transulticient sufficient op ISSUI (371) 273	alling or Truct asmittal is bein postage for fi FEE address -2885, on the	smission og deposited will os class mail in o above, or beis date indicated be	the Unite an envelop is facsimilition.
								(De	preitor's name
			_						(Signatura
									(Date)
APPLICATION NO. FILING DAT		FIRST NAMED INVE		OR ATTORNEY DOCKET NO.			CONFIRMATION NO.		
10/697,184 TTLE OH INVENTION	1030/2003 METHOD AND SYST	EM FOR ACTIVE MOI	Asaf Adi NUTORING OF DEPENL	ency mo	ODELS		0025US1	8188	
APPLIN, TYPE	SMALL, ENTITY	ISSUE MIR DAR	PUBLICATION FEE DU	PRHV.	H HURRI CIA	E IVI	'al. per(s) du	DATE:	i) (U)
conprovisional	NO	\$1510	\$300		\$0	\$1810		03/23/2011	
EXAM	LINER	ART UNIT	CLASS-SUBCLASS	7	93/22/29	11 HUIIN	NCS GOOD	1030 090468	10697
CHUMPITAZ, BOB R		3629	705-001000	7 00::		1510.00		2007.	
Provide Address ind Provide 47; Rev 03-0 Number is required. ASSIONEE NAME A	ondence address (or Char 3/122) attached. ication (or "lice Address" 12 or more recent) attach ND RESIDENCE DATA (as an assignce is identi h in 37 CFK 3.11. Comp	Indication form ed. Use of a Castomer TO BE PRINTED ON	cr agents OR, alterns (2) the name of a sin registered autoracy o 2 registered paterns a listed, no name will t THE PATENT (print or t data will appear on the T a substitute for filing a	gle firm (h agent) and lorneys or printed.			3	locument has be	en filed fo
(A) NAME OF ASSI			(B) RESIDENCE: (CIT						
International I	Business Machines (Corporation	Armonk, New -	ork .					
rase check the appropr	late maignee category or	eategaries (will not be p	rinted on the patent):	3 Individu	ы 🛭 Сотро	ration or c	wher private g	oupentity Q	ioveromen
a. The following fee(s) are submitted: 3 Issue Fee 3 Publication Fee (No small entity discount permitted) 1 Advance Order - # of Copies			b. Payment of Rec(s): (Please first reapply any previously paid issue fee shown above) \[\begin{align*} \$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\						
a. Applicant claim	ins (from status indicated s SMALL, ENTITY statu	s. See 37 CFR 1.27.	D b, Applicant is no lo	nger claim	ing SMALL	ENTITY S	lutus, See 37 C	FR 1.27(g)(2).	
Ofts: The lastic Fee an crest as shown by the	d Publication Fee (if requestrated of the United State	ired) will not be accepte on Patent and Trademark	of from anyone other than coffice.	the applica	ani; a register	ed attorne	y or agent; or t	he assignee or of	her party is
Authorized Signature	S	ع		Date	<u>. </u>	· Me	W 11		=-
Typed or printed num			<u> </u>		istration No.		46,688		-
ils collection of inform application. Confident brilling the completes is form and/or suggesti	mion is required by 37 Cladity is governed by 35 application form to the cast for reducing this burning and 22113-1250. DO	FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FIZES OR	on is required to obtain of it. 14. This collection is a capending upon the industrial of it. COMPLETED FORMS	retain a be stimated to vidual cas cer, U.S. P. O THIS A	encili by the potake 12 min to Any comments and Tra ADDRESS, 5	ublic while ties to con cots on th demark Of ND TO:	th is to file (an appleto, includi a amount of ti fileo, U.S. Dep Commissioner	d by the USPTO ng gathering, pre me you require partment of Com- for Patents, P.O.	to process paring, and to complete merce, P.O. Box 1450

MANUAL STATES

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.